| Electronic Patent Application Fee Transmittal |  |          |          |        |                         |  |  |
|---|--|----------|----------|--------|-------------------------|--|--|
| Application Number:                           | 10690276   |          |          |        |                         |  |  |
| Filing Date:                                  | 20-Oct-2003  |          |          |        |                         |  |  |
| Title of Invention:                           | Compositions and methods for treating inflammatory disorders |          |          |        |                         |  |  |
| First Named Inventor/Applicant Name:          | Daniel Cimbora   |          |          |        |                         |  |  |
| Filer:  | Herbert Leonard Ley/Keri Morris                              |          |          |        |                         |  |  |
| Attorney Docket Number:                       | 1834.01  |          |          |        |                         |  |  |
| Filed as Large Entity                         |  |          |          |        |                         |  |  |
| Utility Filing Fees                           |  |          |          |        |                         |  |  |
| Description                                   |  | Fee Code | Quantity | Amount | Sub-Total in<br>USD(\$) |  |  |
| Basic Filing:                                 |  |          |          |        |                         |  |  |
| Pages:  |  |          |          |        |                         |  |  |
| Claims:                                       |  |          |          |        |                         |  |  |
| Miscellaneous-Filing:                         |  |          |          |        |                         |  |  |
| Petition:                                     |  |          |          |        |                         |  |  |
| Patent-Appeals-and-Interference:              |  |          |          |        |                         |  |  |
| Post-Allowance-and-Post-Issuance:             |  |          |          |        |                         |  |  |
| Extension-of-Time:                            |  |          |          |        |                         |  |  |
| Extension - 2 months with \$0 paid            |  | 1252     | 1        | 450    | 450                     |  |  |

| Description    | Fee Code          | Quantity | Amount | Sub-Total in<br>USD(\$) |
|----------------|-------------------|----------|--------|-------------------------|
| Miscellaneous: |                   |          |        |                         |
|                | Total in USD (\$) |          |        | 450                     |